## 1103065135

FEC FORM 1

## STATEMENT OF ORGANIZATION

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FEGRICA LANDER

NAME OF     COMMITTEE (in full)		(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
WHO DAT PAC				1   1   1	
				1 1 1 1	
ADDRESS (number and street)	49	South Cap	itol Street, SW	, <u>, , , , , , , , , , , , , , , , , , </u>	
(Check if address is changed)	Su	ite 422			
	Wa	shington		DC	20003
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES	S (Plea	se provide only one e	e-mail address)		
(Check if address	L				
is changed)					
COMMITTEE'S WEB PAGE ADD	RESS (	(URL)			
(Check if address					
is changed)	لــــا				
2. DATE 08 / 01	]′[	2011			
3. FEC IDENTIFICATION NU	MBER	C			
4. IS THIS STATEMENT	NE	W (N) OR	AMENDED (A)		
I certify that I have examined this	s State	ment and to the bes	t of my knowledge and belief	it is true, correct	and complete.
Type or Print Name of Treasurer	Ra	ndall Broz			
Signature of Treasurer	)	100+3	3	Date 08	( 01 / 2011 / 2011 / )
NOTE: Submission of false, errodec			may subject the person signing		
Office Use Only			For further information Federal Election Commi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

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TYPE	OF C	COMMITTEE	
Can	didate	e Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate
Name Cand		[	
Cand Party	lidate Affiliati	tion Sought: House Senate President	tate
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	y Con	nmittee:	Maria Maria II. a Maria Ma
(d)		N	ocratic, olican, etc.) Party.
Polit	tical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
, ,	Chrosiji		-
			or Organization
		Membership Organization Trade Association Coo	perative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segrega committee. (i.e., nonconnected committee)	ted fund or party
		In addition, this committee is a Lobbyist/Registrarit PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
***************************************	······································	in addition, this combinate is a Leadership i Ac. (identity sponsor of the c.)	
Joint	t Fund	draising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or necommittees/organizations, at least one of which is an authorized committee of a federal candidate.	nore political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or recommittees/organizations, none of which is an authorized committee of a federal candidate.	nore political
	Com	nmittees Participating in Joint Fundraiser	
			<u></u>
	1.	C True to the final to the fina	
	2.	FEC I5 number	
	3.	FEC ID number	
	4	I	<u>, , , , , , , , , , , , , , , , , , , </u>

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Write or Type Committee Nam	;	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Represe	ntative, or Leadership PAC Sponsor
[		1
Mailing Address	499  Sputh  Capitol  Street,  SW	
-	Suite 422	
		DC   20003  -  , ,
		TATE ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Rep	presentative Kalendership PAC Sponsor
<ol> <li>Custodian of Records: Ide books and records.</li> </ol>	ntify by name, address (phone number optional) and position o	of the person in possession of committee
Full Name Rand	all Broz	
Mailing Address	499 South Capitol Street, SW	
	Suite 422	
	Washington	DC 20003 -
Title or Position	CITY STA	ATE ZIP CODE
Treasurer	Telephone number	202 - 479 - 2527
3. Treasurer: List the name ar any designated agent (e.g.,	d address (phone number optional) of the treasurer of the con assistant treasurer).	nmittee; and the name and address of
Full Name Randa of Treasurer	all Broz	
Mailing Address	499 South Capitol Street, SW	
	Suite 422	
	Washington CITY STA	DC 20003 - ZIP CODE
Title or Position Treasurer	Telephone number	202 - 479 - 2527

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Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position	Telephone nu	ımber 📙	
Banks or Other Deposatety deposit boxes of	ositories: List all banks or other depositories in which the comm or maintains funds.	ittee deposits	funds, holds accounts, rents
Name of Bank, Depos	sitory, etc.		
L B	ank of America, N.A., , , , , , , , , , , , , , , , , , ,	1 1 1 1	<u> </u>
Mailing Address	201 Pennsylvania Avenue, SE		
		<u> </u>	
	Washington	L PC	20003
	CITY	STATE	ZIP CODE
Name of Bank, Depos	sitory, etc.		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 1 1 1 1 1 1 1
Mailing Address	1		
Mailing Address			
Mailing Address		11.1.1	
Mailing Address			<u> </u>

(3/2005)

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